

Pct#	Ward	School	House	Senate	Fire	Soil	W/S	Park		Reg#
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TO REGISTER: All items, except where noted, must be completed to register to vote.

Under federal and/or state law, all electors must present ID when voting.

1. Are you a citizen of the United States of America? ☐ Yes ☐ No*
2. Will you be 18 years of age on or before election day? ☐ Yes ☐ No*

***Note:** If you checked 'no' in response to either of these questions, do not complete this form.

3. MONTANA DRIVER'S LICENSE # _____
 (If you do not have a Montana driver's license number, list the LAST FOUR DIGITS OF SOCIAL SECURITY # _____ under federal law you are required to provide one of the above, unless you do not have either. If you have neither, provide or enclose a copy of ID*.)

*If you have neither number, provide (in person) or enclose (by mail) a copy of one of the following; any photo ID with your name; OR a current utility bill, bank statement, paycheck, government check, or other government document that shows your name and current address.

4. Email Address (optional) _____

5. NAME _____
 (Please print) Last First Middle

6. COUNTY _____

7. ADDRESS WHERE YOU LIVE*

*Precinct is determined by address where you live.

(Street, City, Zip OR Sec., Twp. & Range)

8. MAILING ADDRESS (If different than #7)

9. TELEPHONE NUMBER _____

10. DATE OF BIRTH ____/____/____
 Month Day Year

11. PRINT FORMER NAME (if changed)

12. PLACE LAST REGISTERED

CITY COUNTY STATE

13. VOTER DECLARATION (Read and sign below)

I swear/affirm that: a) I am a U.S. citizen; b) I will be at least 18 years old on or before the next election; c) I will have lived in this county for at least 30 days before the next election; d) I am neither in a penal institution for a felony conviction nor found of unsound mind by a court; e) If I do not now meet these qualifications, I will by the next election; and f) I have provided true information, to the best of my knowledge under penalty of perjury. If I have given false information, I may be subject to a fine or imprisonment or both under Federal or State laws.

14. SIGNATURE _____ DATE _____

ELECTION ADMINISTRATOR
 STILLWATER COUNTY
 P.O. BOX 149
 COLUMBUS, MT 59019

MT

Place
Stamp
Here

(Fold and tape closed here)